

SAMPLE LETTER FOR AUTOMATIC RATE INCREASE

Date:

Ithan Yanofsky, Deputy Bureau Chief
CON and Rates Section
Bureau of Emergency Medical Services
Arizona Department of Health Services
150 North 18th Avenue, Suite 540
Phoenix, Arizona 85007-3248

Dear Mr. Yanofsky:

Place Name Here Ambulance Service requests an adjustment in general public rates according to Arizona Revised Statute ("A.R.S.") § 36-2239(A).

Our Ambulance Service has not applied for an adjustment in public rates within 6 months.

We are requesting a rate increase equal to the amount determined under A.R.S. § 36-2234, subsection E and that the new rates be effective the date the Decision and Order is signed. We are asking that the automatic rate adjustment be applied to the rates checked below:

ALS Base Rate
BLS Base Rate
Mileage Rate
Standby / Waiting Rate
Subscription Service Rate

Sincerely,

Jane/John Doe, Title (Fire Chief / EMS Director / Chief Executive Officer / Chief Executive Officer)
Place Name Here Ambulance Service